

46043-25

4/20/2010

1 of 6

Kathy Kollen
EPA Coordinator
Suncoast Chemical Company
P.O. Box 6025
Clearwater, Florida 33758

APR 20 2010

SUBJECT: Super Black Algaecide
EPA Registration Number: 46043-25
Application Date: March 12, 2010
Receipt Date: March 22, 2010

Dear Ms. Kollen:

This letter acknowledges receipt of the notification identified above submitted under the provisions of the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), as amended and PR Notice 2007-4 and 98-10.

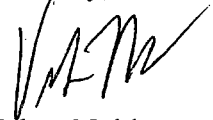
- Revise Container Handling Statements

Based on a review of the submitted information, this notification is acceptable. Your proposed label language is in agreement with PR Notice 2007-4 and the Agency Guidance for Container Disposal. This notification will be made part of the record for this file.

General Comments

Should you have any questions concerning this letter, please contact Tracy Lantz at (703) 308-6415.

Sincerely,



Velma Noble
Product Manager (31)
Regulatory Management Branch I
Antimicrobials Division (7510P)

CONCURRENCES						
SYMBOL	7510P:T.Lantz:4/20/2010	46043-25a	acceptable	notification		
SURNAME	<i>T.Lantz</i>					
DATE	4/20/10					

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Please read instructions on reverse before

ploting form.

Form Approv

OMB No. 2070-0080

Print Form



United States
Environmental Protection Agency
Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number Suncoast Chemicals Combanv/46043-25	2. EPA Product Manager Velma Noble	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Suncoast Chemicals Company / Super Black Algaecide	PM# 31	
5. Name and Address of Applicant (Include ZIP Code) <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	

Section - II

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input type="checkbox"/> "Me Too" Application.
<input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

NOTIFICATION to comply with EPA's PR Notice 2007-4

Section - III

1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input checked="" type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Type of Container <input checked="" type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
* Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt No. per container
3. Location of Net Contents Information <input type="checkbox"/> Label <input checked="" type="checkbox"/> Container	4. Size(s) Retail Container QT	5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled			<input type="checkbox"/> Other <u>Screened</u>

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Kathy Kollen	Title EPA Coordinator	Telephone No. (Include Area Code)
<p align="center">Certification</p> <p>I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.</p>		6. Date Application Received (Stamped)
2. Signature 	3. Title EPA Coordinator	
4. Typed Name Kathy Kollen	5. Date 3/12/10	

March 12, 2010

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504P)
USEPA
Ariel Rios Building
1200 Pennsylvania Avenue NW
Washington, DC 20460


RE: Notification - Super Black Algaecide/46043-25
As per PR Notice 2007-4

Dear Sir or Madam:

I have enclosed a Notification Application, Certification Statement and revised Master Label for *Super Black Algaecide*, EPA Registration No. 46043-25 to comply with EPA's PR Notice 2007-4.

I have enclosed two copies of the label, one of which is highlighted with the changes. If you should have any questions regarding this notification, please contact me at (727) 531-8913, extension 121, or e-mail me at kkollen@suncoastchemicals.com. Thank you for your assistance.

Sincerely,



Kathy Kollen
EPA Coordinator

/Enclosures



SUPER BLACK ALGAECIDE

For Swimming Pools

ACTIVE INGREDIENT:

Copper as elemental*.....	3.07%
n-Alkyl(50% C14, 40% C12, 10%, C16)	
dimethyl benzyl ammonium chloride.....	26.34%
OTHER INGREDIENTS	70.59%
TOTAL	100.00%

This product contains 0.26 lbs. of elemental copper per gallon.
* From Mixed Copper Ethanolamine Complexes.

DANGER

KEEP OUT OF THE REACH OF CHILDREN

See other precautions and first aid on back panel.

Net Contents _____

CHEMICAL HAZARDS

Do not mix this algaecide with soap or other cleaners. Do not premix with other water treating chemicals. These chemicals must be handled separately.

DIRECTIONS FOR USE

It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

This product controls the growth of problem algae in swimming pools. Brush algae spots prior to application. If necessary brush once after each day for two days following application. This product comes concentrated; therefore, dilute the proper dosage of the concentrate with at least nine parts of water. The appropriate amount of product must be added by pouring directly into the pool along the edges while the filter and pump are in operation. To allow time for even distribution on pool water, bathers must allow 10 minutes after treatment before entering pool.

INITIAL APPLICATION: (Free of Visible Algae/Start of Season): Apply 12 oz. of this product per 10,000 gallons of pool water.

If Algae Growth is Visible: Apply initial dose, then vacuum pool after 24 hours to remove dead algae. If pool is heavy with algae growth, first brush algae spots, vacuum, clean and scrub the pool walls. Apply initial dose, then vacuum remaining algae debris.

MAINTENANCE DOSE: Apply 6 oz of this product per 10,000 gallons of pool water every 5 to 7 days. NOTE: After heavy or prolonged rainfall, high prevailing temperatures, or heavy swimming use, add the maintenance dose more frequently.

PRECAUTIONARY STATEMENTS

DANGER. CORROSIVE. Causes irreversible eye damage and skin burns. Harmful if swallowed. May be fatal if absorbed through the skin. Do not get in eyes, on skin, or on clothing. Wear goggles or face shield, rubber gloves and protective clothing when handling. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, or using tobacco. Remove contaminated clothing and wash before reuse.

FIRST AID	
IF IN EYES:	Hold eyelids open and rinse slowly with water for 15 to 20 minutes. Remove contact lenses if present after 5 minutes then continue rinsing eye. Call poison control center or doctor for treatment advice.
IF ON SKIN OR ON CLOTHING:	Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Call a poison control center or doctor for treatment advice.
IF SWALLOWED:	Call a poison control center immediately for treatment advice. Have the person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by a poison control center or a doctor. Do not give anything by mouth to an unconscious person.
IF INHALED:	Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible. Call a poison control center or doctor for further treatment advice.
<u>HOTLINE NUMBER:</u>	
Have the product container or label with you when calling a poison control center or doctor, or going for treatment. In case of emergency, call 1-800-255-3924.	
<u>NOTE TO PHYSICIAN</u>	
Probable mucosal damage may contraindicate the use of gastric lavage.	

ENVIRONMENTAL HAZARDS

{For containers less than 5 gallons}

[This pesticide is toxic to fish and aquatic organisms.]

{For containers 5 gallons or greater}

[This product is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans, or other waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) permit and the permitting authority has been notified in writing

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prior to discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the local sewage treatment plant authority. For guidance contact your State Water Board or Regional Office of the EPA.]

STORAGE AND DISPOSAL

Do not contaminate food or feed by storage or disposal. ✓

{Optional statements – usage depends on whether or not product is offered as a Household/Residential Use product or Non-Household/Residential Use product.}

{Nonrefillable Container – Household/Residential Use}

[Nonrefillable container. Do not reuse or refill this container. Wrap container and put in trash or offer for recycling if available.”] ✓

{Nonrefillable Container – Non-Household/Residential Use}

[**Pesticide Storage:** Store in a locked storage area inaccessible to children and persons unfamiliar with its use. ✓

Pesticide Disposal: Pesticide Wastes are acutely hazardous. Improper disposal of excess pesticide, spray, or mixture of rinsate is a violation of Federal Law. If these wastes cannot be disposed of by use according to label instructions, contact your State Pesticide or Environmental Control Agency or the Hazardous Waste Representative at the nearest EPA Regional Office for guidance. ✓

Container Disposal: Nonrefillable container. Do not reuse or refill this container. Triple rinse (or equivalent.) Offer for recycling, if available, or puncture and dispose of in a sanitary landfill, or by incineration, or, if allowed by state and local authorities, by burning. If burned, stay out of smoke.] ✓

EPA Reg. No. 46043-25
EPA Est No. 46043-FL-1

In Case of Emergency, Call: 1-800-255-3924

**Manufactured By:
Suncoast Chemicals Company
14480 62nd Street North
Clearwater, FL 33760**